

FILING FEE AND CERTIFICATION \$15.00

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	For Office Use Only
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Secretary of State
State of North Dakota
600 E Boulevard Ave Dept 108
Bismarck ND 58505-0500
Telephone 701-328-3665
Toll Free 800-352-0867
Ext 8-3665
Fax 701-328-1690

Name of Applicant Applying for Appointment				Telephone #	
Complete Mailing Address		City		State	Zip Code
Business Name as Authorized to Transact Busin		Telepho	one #		
Complete Mailing Address		City		State	Zip Code
In compliance with the Federal Privacy Act of 1 They are not disclosed to the public. The numl disclosure is requested, failure to do so will not	ers are used by the	e Secretary of State			
A. Business Type Sole Proprietorship - Complete C Below Partnership - Complete C & D Below Other - Define					
C. Name of Owner (or Partner)		Social Security #	Home T	elephone #	
Mailing Address		City		State	Zip Code
D. Name of Partner		Social		Home Telephone #	
Mailing Address		City		State	Zip Code
			E as the true and lawful a		•
be of the same legal force and effect or validity State of	against the undersi	gned, and does here	by agree that any legal pr	rocess serve	•
all lawful process in any action or proceeding a be of the same legal force and effect or validity State of County of Subscribed and Sworn before me, this	against the undersiq as if served by my	gned, and does here self, the partnership	eby agree that any legal property, or the corporation. Signature and Title of	rocess serve	,
be of the same legal force and effect or validity State of County of	against the undersiq as if served by my	gned, and does here self, the partnership	eby agree that any legal property of the corporation. Signature and Title of	rocess serve	,
be of the same legal force and effect or validity State of County of Subscribed and Sworn before me, this	against the undersiq as if served by my	gned, and does here self, the partnership	eby agree that any legal property of the corporation. Signature and Title of	Applicant tary Public	d on said agent
be of the same legal force and effect or validity State of County of Subscribed and Sworn before me, this (Notary Seal)	against the undersign as if served by my day of	gned, and does here self, the partnership	sby agree that any legal property of the corporation. Signature and Title of No My Commission Expires_	Applicant Applicant	d on said agent s

By:____

ALVIN A. JAEGER SECRETARY OF STATE STATE OF NORTH DAKOTA 600 E BOULEVARD AVE DEPT 108 BISMARCK ND 58505-0500

E-MAIL sos@state.nd.us HOME PAGE www.state.nd.us/sec



BUSINESS DIVISION
PHONE (701) 328-4284, FAX (701) 328-2992
CENTRAL INDEXING DIVISION
PHONE (701) 328-3662, FAX (701) 328-4214
ELECTIONS DIVISION
PHONE (701) 328-4146, FAX (701) 328-2992
LICENSING DIVISION
PHONE (701) 328-3665, FAX (701) 328-1690
GENERAL INFORMATION (701) 328-2900
TOLL FREE 1-800-352-0867

Dear Non-resident Commercial Pesticide Applicator/Dealer,

One of the requirements for obtaining certification as a commercial pesticide applicator or dealer is that the applicant must file a written power of attorney with the Secretary of State designating the Secretary of State or a duly appointed resident agent for service of process.

According to Chapter 4-35-11 of the North Dakota Century Code, any non-resident applicant for a pesticide applicator or dealer's certification must file a power of attorney making such an agent designation before it can operate in the state of North Dakota. Once filed, the Secretary of State or the resident agent becomes the agent for the non-resident applicant in the event any lawsuit is filed against the applicant. The power of attorney must be prepared in such a form as to render effective the jurisdiction of North Dakota state courts over the non-resident applicant.

If you wish to designate the Secretary of State as the agent for service of process, complete the form on the reverse side of this page. Please note that the form must be signed before a notary public. If you wish to appoint a resident agent, please contact the Licensing Division for further instructions.

Send the form, along with a \$15 filing fee, to the attention of the Licensing Division in the Secretary of State's office. If you have any questions regarding the appointment of an agent, please contact the Licensing Division at (800) 352-0867, ext. 8-3665.

In addition to the above requirements, your business may have additional registration and filing requirements with the Business Division of the Secretary of State's office. Listed below are some of the business types, which may have such a filing requirement. Many of the forms needed to complete the applicable filing and registration are available on the Secretary of State's website at www.state.nd.us/sec. In addition, they can be ordered through the office's Fax-on-Demand service at (701) 328-0120. If you are unable to obtain the forms from either source, contact the Business Division at (800) 352-0867, ext. 8-4284.

Sole Proprietorship: If you operate your business as a sole proprietorship and use a business name, a Trade Name Registration must be filed.

General Partnership: If your business is a general partnership using a business name, a Partnership Fictitious Name Certificate must be filed.

Corporation: If your business is an out-of-state corporation, it must apply for and obtain a Foreign Corporation Certificate of Authority.

Limited Liability Company: If your business is an out-of-state limited liability company, it must apply for and obtain a Foreign Limited Liability Company Certificate of Authority.

Limited Partnership: If your business is an out-of-state limited partnership, it must file a Foreign Limited Partnership Registration.

Limited Liability Partnership: If your business is an out-of-state limited liability partnership, it must file a Foreign Limited Liability Partnership Registration.

Limited Liability Limited Partnership: If your business is an out-of-state limited liability limited partnership, it must apply for and file a Foreign Limited Liability Limited Partnership Registration.

If you have any questions regarding the filing requirements, contact the Licensing Division at (800) 352-0867, ext. 8-3665.

Sincerely,

TY (My Denot Mary Feist, Director Licensing Division